

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

09/601374

BEST AVAILABLE COPY

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Final	Original	Date	Claim	Final	Original	Date	Claim	Final	Original	Date
1	✓	✓	5/22	51				61			
2	✓	✓	5/22	52				62			
3	✓	✓	5/22	53				63			
4	✓	✓	5/22	54				64			
5	✓	✓	5/22	55				65			
6	✓	✓	5/22	56				66			
7	✓	✓	5/22	57				67			
8	✓	✓	5/22	58				68			
9	✓	✓	5/22	59				69			
10	✓	✓	5/22	70				71			
11	✓	✓	5/22	72				73			
12	✓	✓	5/22	74				75			
13	✓	✓	5/22	76				77			
14	✓	✓	5/22	78				79			
15	✓	✓	5/22	80				81			
16	✓	✓	5/22	82				83			
17	✓	✓	5/22	84				85			
18	✓	✓	5/22	86				87			
19	✓	✓	5/22	88				89			
20	✓	✓	5/22	90				91			
21	✓	✓	5/22	92				93			
22	✓	✓	5/22	94				95			
23	✓	✓	5/22	96				97			
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25	✓	✓	5/22	100							
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If more than 150 claims or 10 actions  
staple additional sheet here

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